

VIRGINIA BOARD OF BAR EXAMINERS

2201 West Broad Street

Suite 101

Richmond, Virginia 23220-2022

804-367-0412

NCBE - N45987632

Processor:

APPLICATION FOR VIRGINIA CORPORATE COUNSEL, PART I

OFFICE USE ONLY
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For Admission to Practice in the Commonwealth as Virginia Corporate Counsel, Part I Pursuant to Rule 1A:5 of the Supreme Court of Virginia

I hereby apply for a certificate to practice law in the Commonwealth of Virginia, pursuant to the Supreme Court of Virginia Rule 1A:5, and I acknowledge I have read the following Notice:

Notice:

Upon receipt of your completed application, the Board will determine that you have established, by satisfactory evidence, that you meet the minimum requirements of Rule 1A:5 and issue a Provisional Certificate.

The Board may require you to appear personally before the Board, the Character and Fitness Committee of the Board, or a member of either the Board or the Committee and furnish such additional information as may be required.

Corporate Counsel Certificate, Part I applications can take up to six (6) months to process.

If the Board determines you are qualified to be issued a Virginia Corporate Counsel Certificate, Part I, the Board shall approve your application and notify you of its decision.

YES I acknowledge I have read the above Notice.

Section 1 - Personal Information

You must apply in your **FULL LEGAL NAME***.

- *Your full legal name must be the **EXACT name and spelling** as listed on your birth certificate, name change order, adoption decree, naturalization or immigration documentation. **Initials are not acceptable unless** initials are part of your full legal name.
- If you are married and have not changed your name with the Social Security Administration or never assumed your spouse's last name on any educational, financial or legal documents, your full legal name would be your maiden name. If you have assumed your spouse's last name, your middle name may be your middle name as shown on your birth certificate, your maiden name, or both.
- Although your Social Security card, passport, or driver's license may be issued in a name **other** than your full legal name, you **must** apply to and be licensed by the Virginia Board of Bar Examiners in your **full legal name**.

1.1 Full legal* name

Ms. Mary

Jane

Smith

Title First name

Middle name

Last name

Suffix

Authorization and Release

By filing this application, I hereby:

YES 5.1 Affirm that all of the information provided herein is true, correct, and complete to the best of my knowledge and belief, and that I have a duty to promptly inform the Virginia Board of Bar Examiners of any circumstances occurring after the date of this application that would affect my responses herein.

YES Authorize and request every person, firm, corporation, association, and agency having control of any documents, records, or other writing, or having other information pertaining to me, to furnish to the Board any such writings and information the Board believes will relate to my moral character and/or fitness to engage in the practice of law, and to permit the Board and any of its agents or representatives to inspect and make copies of such documents, records, and other writings.

YES Agree that all information provided by this application, and all other information received by the Board and believed by it to have a bearing upon my moral character and/or fitness to engage in the practice of law, may be released by the Board at any time, and without liability to the Board, its members, agents, or other representatives, to any judicial, executive, or legislative official, or to any investigatory or regulatory body or agency, when the Board considers such release to be reasonably needed by such official, body, or agency in response to its inquiry relating to my moral character and/or fitness to engage in the practice of law.

YES Agree that the foregoing shall remain in effect for any future application that I may make to the Board.

Signature of Applicant

===== SECTION BELOW MUST BE COMPLETED BY A NOTARY PUBLIC =====

Commonwealth/State/District of _____

County/City of _____

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Mary Jane Smith

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this _____ day of _____, _____

My commission expires on _____, _____

Notary Public

Registration Number (if applicable) _____

NOTARY SEAL (must be affixed)

VIRGINIA RULES OF PROFESSIONAL CONDUCT AFFIDAVIT

I, **Mary Jane Smith**, after first being duly sworn, certify I have read and I am familiar with the **Virginia Rules of Professional Conduct**.

Signature of Applicant

===== SECTION BELOW MUST BE COMPLETED BY A NOTARY PUBLIC =====

Commonwealth/State/District of _____

County/City of _____

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Mary Jane Smith _____

who thereupon made oath that all statements contained in the foregoing affidavit are true and complete.

Given under my hand this _____ day of _____, _____

My commission expires on _____, _____

Notary Public

Registration Number (if applicable) _____

NOTARY SEAL (must be affixed)

VIRGINIA SUPREME COURT RULES
RULE 1A:5 VIRGINIA CORPORATE COUNSEL (PART I)
AFFIDAVIT OF EMPLOYER

In the Matter of the Application of Mary Jane Smith for a Virginia Corporate Counsel, Part I, Certificate:

I, _____, after first being duly sworn, certify the following:

1. I am an officer of the following company:

Company Name _____
Street _____
City _____ State _____ ZIP _____
Phone number _____ Fax number _____
Email address _____

2. I hereby certify that Mary Jane Smith, an applicant for a certificate to practice law in Virginia under Part I of Rule 1A:5 as a Virginia Corporate Counsel, is employed by

Company Name _____
and such employment or association became effective on _____

3. I attest to the fact that the applicant is employed as a lawyer to provide legal services exclusively to the company, including its subsidiaries and affiliates, that the nature of the applicant's employment conforms to the requirements of Part I of Rule 1A:5, and I shall notify the Virginia State Bar immediately of any change in the applicant's employment.

Print Name and Title of Officer

Signature of Officer

SECTION BELOW MUST BE COMPLETED BY A NOTARY PUBLIC

Commonwealth/State/District of _____
County/City of _____

I, a Notary Public of such County/City, certify that on this day personally appeared before me

Mary Jane Smith

who thereupon made oath that all statements contained in this application are true and complete.

Given under my hand this _____ day of _____, _____

My commission expires on _____, _____

Notary Public

Registration Number (if applicable) _____

NOTARY SEAL (must be affixed)

AUTHORIZED PERSON FORM

I, **Mary Jane Smith**, authorize the Virginia Board of Bar Examiners to discuss my application for Virginia Corporate Counsel, Part I with the person named below.

PLEASE NOTE:

- Your Virginia Corporate Counsel, Part I application will take 4 to 6 months from receipt to approval.
- Please **DO NOT call or have your Authorized Person call** to see if we have received your application or any additional submissions.
- To ensure your application or additional submissions have been received, you should use a delivery method that can be tracked or you may include a self-addressed stamped envelope or postcard, which we will date-stamp and return to you.
- In addition, **DO NOT call or have your Authorized Person call** to request progress updates **prior to the 4-month timeline** from receipt of your completed application.

Person Authorized to discuss my application with the Virginia Board of Bar Examiners:

Tom Harrison

Last 4 digits of Authorized Person's SSN: **9319**

I have read and acknowledge the information above.

Signature of Authorized Person

I have read and acknowledge the information above.

Signature of Applicant

